

**Best Available Copy**

**CLAIMS ONLY**

SERIAL NO.	FILING DATE
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APPLICANT(S)
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**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
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TOTAL IND.	7		3			
TOTAL DEP.	9		12			
TOTAL CLAIMS	11		15			

*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
51								
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TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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